



**Plant Industries Division**  
**West Virginia Department of Agriculture**  
1900 Kanawha Blvd. E., Charleston, WV 25305  
304-558-2212

**Walt Helmick**  
Commissioner

**Eric Ewing**  
Director

***West Virginia Department of Agriculture (WVDA)***  
***GYPSY MOTH COOPERATIVE SUPPRESSION PROGRAM***  
***Egg Mass Survey Request Application***

\_\_\_\_\_ **COUNTY**

**Instructions:** Proposed spray blocks must be a minimum of **50 contiguous acres**. Attach a copy of a 7-½ minute topographic map with the **property boundary clearly marked** on it. A plat map should be provided to verify boundaries. A Farm Service Agency aerial photo can be used to mark fields that need omitted. An ESRI shape file, projected in UTM Zone 17, NAD 83 Datum, can be provided by the forest industry.

Use one application for each separate block of 50 acres or more.

Fill out the information below and on reverse and return, along with map, to your county extension agent.

**Applicant Information**

_____				
Applicants Name				
_____				
Development or Business Name				
_____				
Applicant's Mailing Address		( ) _____	( ) _____	
		Home Phone	Work Phone	
_____		( ) _____	( ) _____	
City	State	Zip	Cell Phone	Fax
_____				
E-mail address				

**Local Contact Information**

_____		( ) _____	( ) _____
Local Contact for Absentee Landowner		Home Phone	Work Phone
_____		( ) _____	( ) _____
Local Contact's Mailing Address		Cell Phone	Fax
_____			
City	State	Zip	
_____			
E-mail address			

**APPLICANT, PLEASE COMPLETE SITE SPECIFIC INFORMATION ON REVERSE:**

West Virginia Department of Agriculture is an equal opportunity employer.

Remarks \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Applicant Site Specific Information**

General Property Location (e.g.) 4 miles South of New Creek on Rt. 220 – Turn left on Valley View Road - 500 feet on right

(1) Total block acres \_\_\_\_\_

(2) Total forested acres \_\_\_\_\_

(3) Total exclusion acres \_\_\_\_\_  
(Exclusion minimum is 10 acres)

(4) Total spray acres \_\_\_\_\_

(5) Have you applied for treatment through the WVDA in the past? ☐ Yes ☐ No. \_\_\_\_\_ Last year applied

(6) If yes, do you wish to use the same property boundaries as previously submitted? ☐ Yes ☐ No

(7) Was your property treated last year? ☐ Yes ☐ No. \_\_\_\_\_ Spray material used

(8) Percentage of preferred host trees in proposed treatment block \_\_\_\_\_ %  
e.g. % of oak, birch, alder, apple, aspen and basswood on property

(9) Percent forest canopy cover in proposed treatment block \_\_\_\_\_ %

(10) Forest type is (check one) ☐ Wooded, no permanent residences  
☐ Wooded residential, permanent residences  
☐ Wooded recreational, e.g. state park, state forest, resorts

(11) Number of property owners included in proposed spray block \_\_\_\_\_

(12) Is property gated? ☐ Yes ☐ No Combination Lock # \_\_\_\_\_ *Please note that keys must be provided with this application unless the gate will be left unlocked when contacted by the WVDA.*

(13) Is any portion of the property restricted? ☐ Yes ☐ No. If yes explain \_\_\_\_\_

(14) Check or list any potential hazards such as. ☐ High antennas or towers  
☐ High power lines  
☐ Open bodies of water.

Other \_\_\_\_\_

**Official use only**

Arcview # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Egg Masses per Acre \_\_\_\_\_

Date Surveyed \_\_\_\_/\_\_\_\_/\_\_\_\_ Surveys Completed \_\_\_\_\_ Blow-in-Potential ☐ yes ☐ no

Surveyed by: \_\_\_\_\_ Qualify for Treatment ☐ yes ☐ no

Presence of Virus ☐ yes ☐ no Presence of Fungus ☐ yes ☐ no EM Size ☐ dime ☐ nickel ☐ quarter

Quad 1 \_\_\_\_\_ Quad 2 \_\_\_\_\_ Quad 3 \_\_\_\_\_ Quad 4 \_\_\_\_\_